

## **Questions from TRC Members for testifiers to address at the January 8, 2015 public hearing on Dental Auxiliaries**

### **Questions about the current practice situation:**

What problem (or problems) in dental care in Nebraska do these proposals seek to address?

What are the concerns regarding oversight of dental assistant duties and functions?

Is there a need to license dental assistants given that they are not autonomous practitioners?

### **Questions about the safety of the proposals:**

How would these proposals improve the safety and effectiveness of dental assistant services in Nebraska?

How would these proposals improve the safety and effectiveness of dental hygiene services in Nebraska?

How can a pharmacist know which prescriptions a dental hygienist can prescribe under these proposals?

How can a pharmacist know whether the education and training of a dental hygienist is current or not under the terms of these proposals?

What safety concerns might be associated with the expanded functions for dental hygienists and the public health functions defined in the dental hygiene proposal?

What are the safety concerns associated with dental assistants monitoring nitrous oxide?

What new risks might be associated with the expanded functions for dental auxiliaries under the terms of these proposals, and what would be the 'trade-offs' pertinent to potential new benefits from these proposals?

How can the public know which services a given dental assistant can provide under the terms of these proposals?

### **Questions about the enforceability and/or administration of the proposals:**

How can DHHS administer these proposals given their complexity, and at what cost?

What is a 'dental hygiene diagnosis'? How does this differ from other types of diagnostic procedures in the area of dental care?

What are 'reversal agents'? Under what scenarios would reversal agents actually be used? What level of supervision would be appropriate for those dental hygienists who perform such procedures?

How can the terminology associated with supervision be clarified?

**Questions about education, training, and competency assessment:**

How would competency be determined for dental hygienists under the terms of these proposals? What criteria and what method of measurement would be used?

How would competency be determined for dental assistants under the terms of these proposals? What criteria and what method of measurement would be used?

Would 'OJT' trained dental assistants who choose to become licensed have CE requirements under the terms of these proposals? If so, what would be required?

**Questions about access to care:**

How would these proposals improve access to safe and effective dental care for underserved areas of our state?

**Questions about alternatives to the proposals under review:**

How might the two applicant groups find common ground pursuant to the development of a common proposal?

How might the differences between the two proposals pertinent to the definitions of levels of supervision be reconciled?